

Indiana US&R Task Force – 1
Indianapolis, Indiana
Application Information Sheet

Name: _____ Date: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____
Include Area Code Include Area Code

Primary Email Address: _____ Cell Phone: _____
Include Area Code

Secondary Email Address: _____ (not mandatory)

Pager: _____ Pager Service: _____
Include Area Code (Ex: MECA, Arch, or SBC)

Have you been convicted of a crime? Do not include moving violations. ☐ Y ☐ N
If yes, please describe _____

Are you a citizen of the United States? ☐ Y ☐ N

Reference: Please give four references, two professional and two personal. (Not related)

| Name | Address | Telephone Number |
|------|---------|------------------|
| | | |
| | | |
| | | |
| | | |

Current Employer: _____ Date of Hire: _____

Employer's Address: _____

Employer's Phone Number: _____

Supervisors Name: _____

If firefighter: Station: _____ Shift: _____ Station Phone: _____

Agency Type: Please Check the Type of Agency that is Supporting You

☐ Fire Dept ☐ Police Department ☐ EMS Agency ☐ Civilian

☐ Other: _____

A resume ***is required*** with this application.

Based upon the Job Descriptions, write in your first and second choice positions.
Please print clearly!

First Choice: _____

Second Choice: _____

Indiana US&R Task Force – 1
Indianapolis, Indiana
Applicant Survey

Applicant Name: _____ Date: _____

Interviewee Relationship: (Please check one)

_____ Agency Chief/CEO _____ Co-worker

_____ Immediate Supervisor _____ Subordinate

1. How long have you known the applicant? _____

2. How long have you worked with the applicant? _____

3. Do you believe the applicant to be reliable? Yes No (Please circle)

Please explain your answer: _____

4. Do you believe this applicant works well as a team member in your organization?

Yes No (Please circle)

Please explain your answer: _____

5. Does the applicant perform well under stress? Yes No (Please circle)

Please explain your answer: _____

6. What qualities do you believe this applicant possess that would be beneficial to INTF1?

7. Is there any other information regarding this applicant that you would like to share?

Indiana US&R Task Force – 1
Indianapolis, Indiana
Applicant Survey

Applicant Name: _____ Date: _____

Interviewee Relationship: (Please check one)

_____ Agency Chief/CEO

_____ Co-worker

_____ Immediate Supervisor

_____ Subordinate

8. How long have you known the applicant? _____

9. How long have you worked with the applicant? _____

10. Do you believe the applicant to be reliable? Yes No (Please circle)

Please explain your answer: _____

11. Do you believe this applicant works well as a team member in your organization?

Yes No (Please circle)

Please explain your answer: _____

12. Does the applicant perform well under stress? Yes No (Please circle)

Please explain your answer: _____

13. What qualities do you believe this applicant possess that would be beneficial to INTF1?

14. Is there any other information regarding this applicant that you would like to share?

